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Application No.: 09/692,846
Filing Date: October 19, 2000
Inventor: Courtney C. Konopka
Group Art Unit: 2654
Examiner: Spooner, Lamont M.


From: Martin R. Bader, Reg. No. 54,736

Today's Date: November 17, 2005
Attorney Docket No.: 66161/7114
Pages: Four (4) (including this 1-page coversheet)
Dispatched by: Sara R. Hart

Transmitted herewith for filing via facsimile:

- Transmittal Form PTO/SB/21 (1 pg.)
- Notice of Appeal Form PTO/SB/31 in duplicate (2 pgs.)
- Fax Cover Sheet (1 pg.).

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PTO/SB/21 (09-04)

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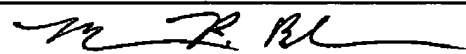
TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/692,846	
	Filing Date	October 19, 2000	
	First Named Inventor	Courtney C. Konopka et al.	
	Art Unit	2654	
	Examiner Name	Spooner, Lamont M.	
Total Number of Pages In This Submission	4	Attorney Docket Number	66161/7114

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Notice of Appeal form PTO/SB/31 and Fax Cover Sheet
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	FITCH, EVEN, TABIN & FLANNERY		
Signature			
Printed name	Martin R. Bader		
Date	November 17, 2005	Reg. No.	54,736

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Typed or printed name	Martin R. Bader	Date	November 17, 2005

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] November 17, 2005 on _____ Signature <u>M. R. Bader</u> Typed or printed name <u>Martin R. Bader</u>		In re Application of <u>Courtney C. Konopka et al.</u>	
		Application Number <u>09/692,846</u>	Filed <u>October 19, 2000</u>
		For <u>NATURAL LANGUAGE INTERACE CONTROL SYSTEM</u>	
		Art Unit <u>2654</u>	Examiner <u>Spooner, Lamont M.</u>
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.			
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))		\$ <u>500.00</u>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:		\$ _____	
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>06-1135</u> . I have enclosed a duplicate copy of this sheet.			
<input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the		<u>M. R. Bader</u> Signature	
<input type="checkbox"/> applicant/inventor.		<u>Martin R. Bader</u> Typed or printed name	
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)			
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>54,736</u>		<u>858-552-1311</u> Telephone number	
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____		<u>November 17, 2005</u> Date	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/> *Total of <u>1</u> forms are submitted.			

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